PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

139630

5046

| appropriate. All further con indicated unless corrected by | respondence including the location or directed otherwise | smitting the ISSUE FEE and PUBL Patent, advance orders and notification in Block 1, by (a) specifying a new | n of maintenance tees | will be mailed to the current | i correspondence address as |
|--|--|---|---|---|--|
| CURRENT CORRESPONDENCE 25944 OLIFF & BERRI P.O. BOX 320850 ALEXANDRIA, V | E ADDRESS (Note: Use Block 1 for 90 10/07/2010 | JAN 0 5 2011 & | Fee(s) Transmittal. T papers. Each additional to the service of the service of the service of the service addressed to the Management of t | of mailing can only be used for his certificate cannot be used nal paper, such as an assignmate of mailing or transmission. ertificate of Mailing or Transmittal is being with sufficient postage for final Stop ISSUE FEE address (PTO (571) 273-2885, on the | for any other accompanying ent or formal drawing, must smission g deposited with the United street class mail in an envelope above, or being facsimile |
| | | | | | (Depositor's name) |
| | | | | | (Signature) |
| | | | | | (Date) |
| APPLICATION NO. | FILING DATE | FIRST NAMED INVE | NTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |

Norman Ronald Smith

TITLE OF INVENTION: IMAGE PROCESSING SYSTEM FOR USE WITH A PATIENT POSITIONING DEVICE

06/07/2006

10/516,400

| APFLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$755 \$300 \$81.066/2811 SNDHARMI \$1055 01/07/2011 EXAMINER ART UNIT CLASS-SUBCLASS 81 FC:2531 91 FC:2531 7755, 88 0P RASHIDIAN, MOHAMMAD M 2624 382-13200 92 FC:1584 389.89 0P 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached. CFR 1.363. CFR 1.363. CFR 1.363. Change of correspondence address (or Change of Correspondence Address form PTO/SB/12) attached. CFR 2.363. CFR 2.363. CFR 2.363. CFR 2.363. Address from PTO/SB/12) attached. CFR 2.363. CFR 2.363. CFR 2.363. CFR 2.363. AGD 3.363. CFR 2.363. CFR 2.364. CFR 2.363. CFR 2.364. CFR 2.364. CFR 2.364. CFR 2.364. CFR 2.364. CFR 2.364. CF | | | | | | | |
|--|--|----------------------|----------------------|---------------------|--|------------------|-----------|
| EXAMINER ART UNIT CLASS-SUBCLASS 81 FC:2581 755.68 0P | APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSUE FEE | TOTAL FEE(S) DUE | DATE DUE |
| RASHIDIAN, MOHAMMAD M 2624 382-132000 82 FC:1584 755, 88 OP 368, 88 OP 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address from 17058/122) attached. — "Fee Address" indication for "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE Vision RT Limited Diagnet of Correspondence address or indication form printed on the patent. If an assignee is identified below, the document has been filed for following fee(s) are submitted: At The following fee(s) are submitted: A Check is enclosed. Ck# 234539 (\$1055) Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Advance Order - # of Copies 5. Change in Entity Status (from status indicated above) A Applicant claims SMALL ENTITY status. See 37 CFR 1.27. A Department by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0461. (enclose an extra copy of this form) overpayment, to Deposit Account Number 15-0461. (enclose an extra copy of this form) overpayment, to Deposit Account Number 15-0461. (enclose an extra copy of this form) overpayment, to Deposit Account Number 15-0461. (enclose an extra copy of this form) overpayment, to Deposit Account Number 15-0461. (enclose an extra copy of this form) overpayment, to Deposit Account Number 15-0461. (enclose an ex | nonprovisional | YES | \$755 | \$300 | \$0 \$1055 01/07/2011 01/06/2011 SMOHAMM1 00000076 10516400 | | |
| RASHIDIAN, MOHAMMAD M 2624 382-132000 62 FC:1584 388.00 60 p 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.53). Change of correspondence address (or Change of Correspondence Address four PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address four PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address four PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address four PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address four PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address four PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address four PTO/SB/122) attached. Change in Endity Status (from Status indicated above) Change in Endity Status (from status indicated above) Advance Order - # of Copies Change in Entity Status (from status indicated above) Applicant claims SMALL ENTITY status. See 37 CFR 1.27. Authorized Signature Date January 5, 2011 See Acther is enclosed. Change of Correspondence address (12) and Status and Trademark Office. Authorized Signature 1. Change in Entity Status (from status indicated above) Date January 5, 2011 | EXAMINER | | ART UNIT | CLASS-SUBCLASS | | | 755 80 ND |
| CFR 1.363). Change of correspondence address (or Change of Correspondence Address Indication (or "Fee Address" Indication form PTO/SB/122) attached. Prec Address' indication (or "Fee Address" Indication form PTO/SB/147, Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE Vision RT Limited Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government by Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies Publication Fee (No small entity discount permitted) Advance Order - # of Copies Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. ck#234539 (\$1055) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0461 (enclose an extra copy of this form) S. Change in Entity Status (from status indicated above) Authorized Signature Date January 5, 2011 Date January 5, 2011 | RASHIDIAN, MOHAMMAD M | | 2624 | 382-132000 | | | |
| 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) Issue Fee | CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been fil recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents. If no name is listed, no name will be printed. 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3 In the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | | | |
| a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party interest as shown by the records of the United Status Patent and Trademark Office. Date January 5, 2011 | 4a. The following fee(s) are submitted: ✓ Issue Fee ✓ Publication Fee (No small entity discount permitted) 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ✓ A check is enclosed. Ck#234539 (\$1055) ✓ Payment by credit card. Form PTO-2038 is attached. | | | | | | |
| Authorized Signature Date January 5, 2011 | a. Applicant clain | ns SMALL ENTITY stat | us. See 37 CFR 1.27. | | | | |
| | Authorized Signature | | | | Date <u>January</u> 5 | 5, 2011 | |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.